

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Shunpei Yamazaki, et al.

Art Unit : 2813

Serial No. : 09/898,986

Examiner : Laura Schillinger

Filed : July 3, 2001

Confirmation No.: 3065

Notice of Allowance Date: September 7, 2005

Title : SEMICONDUCTOR DEVICE AND METHOD OF MANUFACTURING THE
SAME

MAIL STOP ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed September 7, 2005, enclosed are a completed issue fee transmittal form PTOL-85b and payment of \$1700 for the required issue fee and publication fee.

Payment of the issue and publication fees in the amount of \$1700 are being paid concurrently herewith on the Electronic Filing System (EFS) by way of Deposit Account authorization. Please apply any other charges or credits to Deposit Account No. 06-1050.

Respectfully submitted,

Date: December 6, 2005


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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mall**

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26171 7590 09/07/2005

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/898,986	07/03/2001	Shunpei Yamazaki	07977-163003	3065

TITLE OF INVENTION: SEMICONDUCTOR DEVICE AND METHOD OF MANUFACTURING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/07/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
SCHILLINGER, LAURA	2813	438-149000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)	

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Semiconductor Energy Laboratory Co., Ltd.

Atsugi-shi, Kanagawa-ken, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

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<input checked="" type="checkbox"/> Issue Fee	<input type="checkbox"/> A check in the amount of the fee(s) is enclosed.
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<input type="checkbox"/> J. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	

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(Authorized Signature)  (Date) December 6, 2005

Typed or Printed Name: John F. Hayden, Registration No. 37,640

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